Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF WASHINGTON	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Cynthia First name R. Middle name Murphy Last name and Suffix (Sr., Jr., II, III)	Christopher First name J. Middle name Rose Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0824	xxx-xx-9486

Debtor 1 Cynthia R. Murphy
Debtor 2 Christopher J. Rose

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Your Employer Identification Number (EIN), if any.		EIN	EIN		
5.	Where you live	40 F 44th Assessed	If Debtor 2 lives at a different address:		
		42 E. 14th Avenue Spokane, WA 99202 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Spokane County	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

	otor 1 otor 2	Cynthia R. Murphy Christopher J. Ro					Case number (if known)		
Par	t 2:	Tell the Court About	Your Bank	ruptcy C	ase				
7. The chapter of the Bankruptcy Code you are choosing to file under				brief description of each, see , go to the top of page 1 and		d by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy priate box.			
	choc	sing to file under	☐ Chapter 7						
			■ Chapt	Chapter 11					
			☐ Chapt	er 12					
			☐ Chapt	er 13					
8.	How	you will pay the fee	abo ord	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for no cout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check reder. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or pre-printed address. If you choose this option, sign and attach the Application for Individual he Filing Fee in Installments (Official Form 103A). If you choose this option only if you are filing for Chapter 7. By law, a jut is not required to, waive your fee, and may do so only if your income is less than 150% of the official power opplies to your family size and you are unable to pay the fee in installments). If you choose this option, you reapplication to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.			ee yourself, you may pay with cash, cashier's check, or money		
							option, sign and attach the Application for Individuals to Pay		
			☐ I re	quest th	at my fee be waived (You m	ay request this op	option only if you are filing for Chapter 7. By law, a judge may,		
			app	olies to yo	our family size and you are un	able to pay the fe	ee in installments). If you choose this option, you must fill out		
9.		you filed for cruptcy within the	No.						
		B years?	☐ Yes.						
				District		When	Case number		
				District		When	Case number		
				District		When	Case number		
10.		any bankruptcy	■ No						
	filed not f you, parti	s pending or being by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.						
	affili	ate?		5.1.			B. Leiter Line		
				Debtor		When	Relationship to you		
				District Debtor		when	Case number, if known Relationship to you		
				District		When	Case number, if known		
				District			Case number, il known		
11.		ou rent your lence?	■ No.	Go to	line 12.				
	16910	iciloc:	☐ Yes.	Has y	our landlord obtained an evic	tion judgment aga	gainst you?		
					No. Go to line 12.				
					Yes. Fill out <i>Initial Statemen</i> this bankruptcy petition.	nt About an Evicti	tion Judgment Against You (Form 101A) and file it as part of		

	tor 1 Cynthia R. Murphy tor 2 Christopher J. Ro			Case number (if known)
art	t3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	tor
2.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to Part 4.	
		■ Yes.	Name and location of bus	iness
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one			Cynthia Murphy, Sole Name of business, if any	Proprietor
	sole proprietorship, use a separate sheet and attach		Number, Street, City, State	te & ZIP Code
	it to this petition.		Check the appropriate bo	x to describe your business:
			☐ Health Care Busing	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as d)	efined in 11 U.S.C. § 101(53A))
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
			■ None of the above	
3.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	proceed you are d	under Subchapter V so that it choosing to proceed under Su v statement, and federal incor (B). I am not filing under Chap	court must know whether you are a small business debtor or a debtor choosing to a can set appropriate deadlines. If you indicate that you are a small business debtor or bchapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. oter 11. 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.		11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
art	Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention
4.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any	☐ Yes.	What is the hazard? If immediate attention is	
	property that needs immediate attention?		needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number Cheet City Chate 9 7in Code
				Number, Street, City, State & Zip Code

Debtor 1 Cynthia R. Murphy Debtor 2 Christopher J. Rose

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 2 Christopher J. Ro				Case nu	umber (if known)	
Par	t 6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?		Are your debts primarily cindividual primarily for a per			defined in 11 U.S.C. §	3 101(8) as "incurred by an
			☐ No. Go to line 16b.				
			■ Yes. Go to line 17.				
			Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consu	mer debts or bus	siness debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. are paid that funds will be a				nd administrative expenses
	administrative expenses are paid that funds will		□ No				
	be available for distribution to unsecured		☐ Yes				
	creditors?						
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-5	
	you estimate that you owe?	☐ 50-99		□ 5001-10,000 □ 10,001-25,0		☐ 50,001-1 ☐ More tha	·
		☐ 100-19 ☐ 200-99		□ 10,001-25,0	000	□ More tria	11100,000
19.	How much do you	□ \$0 - \$5		\$ 1,000,001	- \$10 million		0,001 - \$1 billion
	estimate your assets to be worth?		1 - \$100,000 01 - \$500,000	□ \$10,000,00°			00,001 - \$10 billion 000,001 - \$50 billion
	be worth?	□ \$500,001 - \$1 million			□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		n \$50 billion
20.	How much do you	□ \$0 - \$5	0,000	\$ 1,000,001	- \$10 million	□ \$500,000	0,001 - \$1 billion
	estimate your liabilities to be?	□ \$50,00	01 - \$100,000	□ \$10,000,00°		□ \$1,000,0	000,001 - \$10 billion
			01 - \$500,000 01 - \$1 million	□ \$50,000,00°			,000,001 - \$50 billion an \$50 billion
				\$100,000,00	01 - \$500 million		an 400 billion
Par	7: Sign Below						
For	you	I have exa	amined this petition, and I de	eclare under penalty of p	perjury that the in	nformation provided is	true and correct.
			hosen to file under Chapter ates Code. I understand the				
			ney represents me and I did , I have obtained and read th				elp me fill out this
		I request r	relief in accordance with the	chapter of title 11, Unit	ed States Code,	, specified in this petitio	on.
		I understa bankrupto and 3571.	nd making a false statement y case can result in fines up	t, concealing property, to \$250,000, or impriso	or obtaining mor onment for up to	ney or property by fraud 20 years, or both. 18 t	d in connection with a U.S.C. §§ 152, 1341, 1519,
		/s/ Cynth	nia R. Murphy		/s/ Christoph		
			R. Murphy of Debtor 1		Christopher Signature of D		
		Executed			Executed on	2/15/2024	
			MM / DD / YYYY		•	MM / DD / YYYY	

Pg 6 of 60

Debtor 1 Debtor 2	Cynthia R. Murph Christopher J. Ro	•	Ca	se number (if known)
•	attorney, if you are ted by one	under Chapter 7, 11, 12, or 13 of title 11, United S	States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(t
•	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies, conschedules filed with the petition is incorrect.	ertify that I have no kno	wledge after an inquiry that the information in the
	. •	/s/ Kevin O'Rourke	Date	2/15/2024
		Signature of Attorney for Debtor		MM / DD / YYYY
		Kevin O'Rourke		
		Printed name		
		Southwell & O'Rourke		
		Firm name		
		421 W. Riverside Avenue		

Email address

kevin@southwellorourke.com

Suite 960

28912 WA Bar number & State

Spokane, WA 99201
Number, Street, City, State & ZIP Code
Contact phone 509-624-0159

Official Form 101 24-00217-FPC11

Pg 7 of 60

	in this information to identify your case:		
Deb	tor 1 Cynthia R. Murphy First Name Middle Name Last Name		
Deh	otor 2 Christopher J. Rose		
	use if, filing) First Name Middle Name Last Name		
l Init	ed States Bankruptcy Court for the: EASTERN DISTRICT OF WASHINGTON		
01111	Exercise 50 minus 50		
	e number		ata Mada ta da la la
(IT KN	own)	_	ck if this is an nded filing
		anie	nded filling
Эf	ficial Form 106Sum		
Su	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
	s complete and accurate as possible. If two married people are filing together, both are equally responsible for	or supply	ing correct
nfoi	mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend		
our	original forms, you must fill out a new Summary and check the box at the top of this page.		
Par	1: Summarize Your Assets		
		V	
			assets of what you own
		raido	oa. you o
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	725,000.00
		·	,
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	738,585.41
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,463,585.41
Par	2: Summarize Your Liabilities		
			liabilities nt you owe
0	Cabadida D. Cuaditara Mha Haya Olaima Caarrad by Dramark (Official Forms 400D)		•
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	830,304.53
_			
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	255,730.07
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	318,869.19
	W		4 40 4 000
	Your total liabilities	\$	1,404,903.79
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I)		
→.	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$	23,848.28
	Cabadida II Vary Francesco (Official Forms 100 I)		
_	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	18,124.84
5.	<u> </u>	_	
5. Pari	4: Answer These Questions for Administrative and Statistical Records		
	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
Par		ur other so	chedules.
Par	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other so	chedules.
Par	Are you filing for bankruptcy under Chapters 7, 11, or 13?	ur other so	chedules.

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Official Form 106Sum

the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

Debtor 1 Cynthia R. Murphy
Debtor 2 Christopher J. Rose

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

43,987.08

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	255,730.07
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	255,730.07

Deb	tor 1	Cynthia R. Murphy			
			le Name Last Name		
	tor 2	Christopher J. Rose			
Spo	ise, if filing)	First Name Middl	le Name Last Name		
Jnit	ed States Bank	ruptcy Court for the: EASTERN	I DISTRICT OF WASHINGTON		
as	e number				☐ Check if this is a amended filing
		<u>n 106A/B</u>			
SC	hedule	A/B: Property			12/15
	Yes. Where is th		What is the property? Check all that apply		
	Yes. Where is the Debtors' Hoi 42 E. 14th A	me	Single-family home		laims or exemptions. Put
	Debtors' Ho 42 E. 14th A	me		the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	Debtors' Ho 42 E. 14th A Street address, if an	me Venue vailable, or other description	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home	the amount of any secure Creditors Who Have Class Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
	Debtors' Ho 42 E. 14th A Street address, if a	me venue vailable, or other description WA 99202-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secure Creditors Who Have Class Current value of the entire property?	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
	Debtors' Ho 42 E. 14th A Street address, if an	me Venue vailable, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any secure Creditors Who Have Class Current value of the entire property? \$725,000.00	current value of the portion you own?
	Debtors' Ho 42 E. 14th A Street address, if a	me venue vailable, or other description WA 99202-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any secure Creditors Who Have Class Current value of the entire property? \$725,000.00 Describe the nature of	current value of the portion you own? \$725,000.0
	Debtors' Ho 42 E. 14th A Street address, if a	me venue vailable, or other description WA 99202-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	the amount of any secure Creditors Who Have Class Current value of the entire property? \$725,000.00 Describe the nature of	current value of the portion you own? \$725,000.0
	Debtors' Ho 42 E. 14th A Street address, if an Spokane	me venue vailable, or other description WA 99202-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	the amount of any secure Creditors Who Have Class Current value of the entire property? \$725,000.00 Describe the nature of (such as fee simple, ter	current value of the portion you own? \$725,000.0
	Debtors' Ho 42 E. 14th A Street address, if an Spokane City	me venue vailable, or other description WA 99202-0000	■ Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Class Current value of the entire property? \$725,000.00 Describe the nature of (such as fee simple, ter	current value of the portion you own? \$725,000.0
	Debtors' Ho 42 E. 14th A Street address, if an Spokane	me venue vailable, or other description WA 99202-0000	■ Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Class Current value of the entire property? \$725,000.00 Describe the nature of (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$725,000.0 your ownership interest nancy by the entireties, c
	Debtors' Ho 42 E. 14th A Street address, if an Spokane City	me venue vailable, or other description WA 99202-0000	■ Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Class Current value of the entire property? \$725,000.00 Describe the nature of (such as fee simple, ter a life estate), if known. Check if this is cor (see instructions)	Current value of the portion you own? \$725,000.0 your ownership interest nancy by the entireties, of
1.1	Debtors' Ho 42 E. 14th A Street address, if an Spokane City	me venue vailable, or other description WA 99202-0000	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other ■ Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this ite.	the amount of any secure Creditors Who Have Class Current value of the entire property? \$725,000.00 Describe the nature of (such as fee simple, ter a life estate), if known. Check if this is cor (see instructions)	Current value of the portion you own? \$725,000.0 your ownership interest nancy by the entireties, c

Describe rour verticles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debto		Christopher J. Rose		Case number (if known)	
Ca	rs, vans,	trucks, tractors, sport utility v	rehicles, motorcycles		
	No				
•	⁄es				
3.1	Make:	Subaru	Who has an interest in the property? Check one	Do not deduct secured cla	aims or exemptions. Put
J. I	Model:	Outback	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	2015	Debtor 2 only	Current value of the	Current value of the
	Approxir	nate mileage:	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	At least one of the debtors and another		
			■ Check if this is community property (see instructions)	\$5,000.00	\$5,000.0
3.2	Make:	Lexus	Who has an interest in the property? Check one	Do not deduct secured cla	
	Model:		☐ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	2022	Debtor 2 only	Current value of the	Current value of the
	Approxin	mate mileage:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	\square At least one of the debtors and another		
			Check if this is community property (see instructions)	\$43,000.00	\$43,000.0
3.3	Make: Model:	Jeep	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured clause the amount of any secure Creditors Who Have Claim	ed claims on Schedule D:
	Year:	2022	Debtor 2 only	Creditors who have Clair	ms Secured by Froperty.
		nate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		formation:	☐ At least one of the debtors and another	onino proporty :	pormon you omm
			■ Check if this is community property (see instructions)	\$47,250.88	\$47,250.8
	<i>mples:</i> B No Yes	oats, trailers, motors, personal v	(see instructions) and other recreational vehicles, other vehicles, vatercraft, fishing vessels, snowmobiles, motorcycle	and accessories	Ψ+1,23
+. 1	Make: Model:	Drift Boat and Trailer	Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	ed claims on <i>Schedule L</i>
	Year:		☐ Debtor 2 only		
			■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other inf	formation:	☐ At least one of the debtors and another	pp	, ,
			Check if this is community property (see instructions)	\$3,000.00	\$3,000.0
1.2	Make:	Newmar	Who has an interest in the property? Check one	Do not deduct secured clause the amount of any secure	
	Model:	Motorhome	Debtor 1 only	Creditors Who Have Clair	
	Year:	2022	☐ Debtor 2 only	Current value of the	Current value of the
			■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	\square At least one of the debtors and another		
			Check if this is community property (see instructions)	\$180,000.00	\$180,000.0

Debtor			Case number	(if known)
		f the portion you own for all of your entries ed for Part 2. Write that number here		
Dord Or	Danasiha Vasa Basas	and and thousand them.		
		onal and Household Items legal or equitable interest in any of the follo	owing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exai</i> □ N		furnishings nces, furniture, linens, china, kitchenware		
		Household Goods and Furnishings		\$20,000.00
□N	mples: Televisions a including cel	and radios; audio, video, stereo, and digital eq I phones, cameras, media players, games	uipment; computers, printers, scanner	s; music collections; electronic devices
		Electronics		\$1,600.00
Exai	other collect	I figurines; paintings, prints, or other artwork; lions, memorabilia, collectibles	pooks, pictures, or other art objects; st	amp, coin, or baseball card collections;
Exai ■ N	mples: Sports, photo musical instr	ographic, exercise, and other hobby equipmer	nt; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
□и	amples: Pistols, rifle	s, shotguns, ammunition, and related equipme	ent	
		1-Shotgun, 1-Pistol		\$200.00
□N	amples: Everyday cl	othes, furs, leather coats, designer wear, sho	es, accessories	
		Wearing Apparel		\$1,000.00
□N	<i>amples:</i> Everyday je	ewelry, costume jewelry, engagement rings, w	edding rings, heirloom jewelry, watche	s, gems, gold, silver
		Jewelry		\$10,000.00
		· ·		· - · · · · · · · · · · · · · · · · · ·

•	opher J. Rose	Case number (if kno	own)
13. Non-farm anima	als s, cats, birds, horses		
□ No	5, 0at3, bird3, 1101303		
Yes. Describe			
	4 Dogs/2 Cats		\$0.00
14. Any other perso	onal and household items ye	ou did not already list, including any health aids you did not lis	st
■ No	.,,		
☐ Yes. Give spe	cific information		
		from Part 3, including any entries for pages you have attached	\$32,800.00
Part 4: Describe You	ur Financial Assets		
		erest in any of the following?	Current value of the
·			portion you own? Do not deduct secured claims or exemptions.
■ No		your home, in a safe deposit box, and on hand when you file your p	petition
⊔ Yes			
	king, savings, or other financ	ial accounts; certificates of deposit; shares in credit unions, brokera accounts with the same institution, list each.	age houses, and other similar
Yes		Institution name:	
	17.1.	Wells Fargo	\$3,000.00
	17.2.	STCU	\$400.00
	17.3.	STCU (SSDI)	\$1,800.00
	17.0.		
	17.4.	Southwell & O'Rourke, P.S. Trust Account	\$5,000.00
Examples: Bond	funds, or publicly traded sto I funds, investment accounts	ocks with brokerage firms, money market accounts	
■ No □ Yes	Institution or	issuer name:	
		incorporated and unincorporated businesses, including an int	erest in an LLC narthershin and
joint venture	need stock and interests in	moorporated and unmoorporated businesses, metading an inc	srest in an EEO, partnership, and
	cific information about them		
33. 3 . 140 apc	Name of entity:	% of ownership:	
Negotiable instru	uments include personal chec	er negotiable and non-negotiable instruments cks, cashiers' checks, promissory notes, and money orders. Innot transfer to someone by signing or delivering them.	

	ebtor 1 ebtor 2	Cynthia R. Murphy Christopher J. Rose	Case number (ii	f known)
	☐ Yes.	Give specific information about them Issuer name:		
21.		ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-	sharing plans
	_	List each account separately. Type of account:	Institution name:	
			401K	\$416,013.53
22.	Your s		so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications	companies, or others
			Institution name or individual:	
23.	Annuit ■ No	ies (A contract for a periodic payment of mor	ney to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		ts in an education IRA, in an account in a C. §§ 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tui	ition program.
	Yes	Institution name and description	on. Separately file the records of any interests.11 U.S.C. §	§ 521(c):
25.	Trusts ■ No	, equitable or future interests in property ((other than anything listed in line 1), and rights or pow	vers exercisable for your benefit
	☐ Yes.	Give specific information about them		
26.		s, copyrights, trademarks, trade secrets, a bles: Internet domain names, websites, proce	and other intellectual property eeds from royalties and licensing agreements	
	_	Give specific information about them		
27.		es, franchises, and other general intangiboles: Building permits, exclusive licenses, coo	oles operative association holdings, liquor licenses, profession	al licenses
	_	Give specific information about them		
Mo	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref ■ No	funds owed to you		
	☐ Yes.	Give specific information about them, includi	ing whether you already filed the returns and the tax years	S
29.		support oles: Past due or lump sum alimony, spousal	support, child support, maintenance, divorce settlement,	property settlement
		Give specific information		
30.	Exam _l	amounts someone owes you oles: Unpaid wages, disability insurance payr benefits; unpaid loans you made to som	ments, disability benefits, sick pay, vacation pay, workers neone else	' compensation, Social Security
	■ No □ Yes.	Give specific information		

page 5

Schedule A/B: Property

Official Form 106A/B

	ebtor 1 ebtor 2	Cynthia R. Murp Christopher J. F		Case number (if known)	
31.		ets in insurance poli coles: Health, disability	cies v, or life insurance; health savings account (HSA)	; credit, homeowner's, or renter's insurar	nce
		Name the insurance	company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
			Term Life Insurance (No CSV)		\$1.00+
32.	If you		at is due you from someone who has died a living trust, expect proceeds from a life insurar	nce policy, or are currently entitled to reco	eive property because
	☐ Yes.	Give specific information	ation		
33.	Examµ ■ No		es, whether or not you have filed a lawsuit or not you have fi		
34.	■ No	contingent and unlide Describe each claim	quidated claims of every nature, including co	unterclaims of the debtor and rights to	set off claims
35.	■ No	nancial assets you d	•		
36			ll of your entries from Part 4, including any er ber here		\$426,214.53
Pa	rt 5: De	scribe Any Business-F	Related Property You Own or Have an Interest In. Lis	st any real estate in Part 1.	
	_ `	, ,	or equitable interest in any business-related proper	ty?	
	_	o to Part 6. So to line 38.			
	_ 100. 0	50 10 11110 00.			
Pa			Commercial Fishing-Related Property You Own or Fest in farmland, list it in Part 1.	lave an Interest In.	
46.	_ `	own or have any le	egal or equitable interest in any farm- or comm	nercial fishing-related property?	
	☐ Yes	. Go to line 47.			
Pa	rt 7:	Describe All Propert	y You Own or Have an Interest in That You Did Not	List Above	
53.	Examp	oles: Season tickets,	ry of any kind you did not already list? country club membership		
	■ Yes.	Give specific informa	ition		
			Tires		\$1,320.00
54	hbA	the dollar value of a	II of vour entries from Part 7. Write that numb	er here	\$1,320,00

Debtor 1 Cynthia R. Murphy Christopher J. Rose Case number (if known) Debtor 2 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$725,000.00 Part 2: Total vehicles, line 5 56. \$278,250.88 57. Part 3: Total personal and household items, line 15 \$32,800.00 58. Part 4: Total financial assets, line 36 \$426,214.53 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$1,320.00 62. Total personal property. Add lines 56 through 61... \$738,585.41 Copy personal property total \$738,585.41 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$1,463,585.41

Fill in this information to identify your case:							
Debtor 1	Cynthia R. Murph						
	First Name	Middle Name	Last Name				
Debtor 2	Christopher J. Ro	se					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F WASHINGTON				
Case number							
(if known)					Check if this is an amended filing		
_					_		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Debtors' Home 42 E. 14th Avenue Spokane, WA 99202 Spokane	\$725,000.00		\$219,366.48	Wash. Rev. Code §§ 6.13.010 6.13.020, 6.13.030	
County Line from Schedule A/B: 1.1	I		100% of fair market value, up to any applicable statutory limit	0.10.020, 0.10.000	
2015 Subaru Outback Line from Schedule A/B: 3.1	\$5,000.00		\$5,000.00	Wash. Rev. Code § 6.15.010(1)(d)(iv)	
Ellie Holli Genedale PVD. G.1			100% of fair market value, up to any applicable statutory limit	3.10.010(1)(4)(11)	
Drift Boat and Trailer Line from Schedule A/B: 4.1	\$3,000.00		\$3,000.00	Wash. Rev. Code § 6.15.010(1)(d)(ii)	
Ellie Helli Gerredale 772. 411			100% of fair market value, up to any applicable statutory limit	3.10.010(1)(4)(1)	
2022 Newmar Motorhome	\$180,000.00		\$818.35	Wash. Rev. Code § 6.15.010(1)(d)(ii)	
Enternolli dollodale 702.			100% of fair market value, up to any applicable statutory limit		
Household Goods and Furnishings Line from Schedule A/B: 6.1	\$20,000.00		\$13,500.00	Wash. Rev. Code § 6.15.010(1)(d)(i)	
Ellio Holli Golloddio 77D. Gil			100% of fair market value, up to any applicable statutory limit	3.13.3.3.4.7(4)(4)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

Debtor 1 Cynthia R. Murphy Christopher J. Rose

Case number (if known)

Christopher J. Rose			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Household Goods and Furnishings	\$20,000.00		\$6,500.00	Wash. Rev. Code §
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	6.15.010(1)(d)(ii)
Electronics Line from Schedule A/B: 7.1	\$1,600.00		\$1,600.00	Wash. Rev. Code § 6.15.010(1)(d)(i)
			100% of fair market value, up to any applicable statutory limit	(// //
1-Shotgun, 1-Pistol Line from Schedule A/B: 10.1	\$200.00		\$200.00	Wash. Rev. Code § 6.15.010(1)(d)(ii)
Zino nom Gomedalo 702. Terr			100% of fair market value, up to any applicable statutory limit	,
Wearing Apparel Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	Wash. Rev. Code § 6.15.010(1)(a)
			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$10,000.00		\$7,000.00	Wash. Rev. Code § 6.15.010(1)(a)
			100% of fair market value, up to any applicable statutory limit	(// /
Jewelry Line from Schedule A/B: 12.1	\$10,000.00		\$3,000.00	Wash. Rev. Code § 6.15.010(1)(d)(ii)
			100% of fair market value, up to any applicable statutory limit	, and a second second
Wells Fargo Line from Schedule A/B: 17.1	\$3,000.00		\$3,000.00	Wash. Rev. Code § 6.15.010(1)(d)(ii)
			100% of fair market value, up to any applicable statutory limit	, and a second second
STCU Line from Schedule A/B: 17.2	\$400.00		\$400.00	Wash. Rev. Code § 6.15.010(1)(d)(ii)
Line from Schedule AVD. 17.2			100% of fair market value, up to any applicable statutory limit	0.10.010(1)(0)(1)
STCU (SSDI) Line from Schedule A/B: 17.3	\$1,800.00		\$1,800.00	Wash. Rev. Code § 6.15.010(1)(d)(ii)
			100% of fair market value, up to any applicable statutory limit	
401K Line from Schedule A/B: 21.1	\$416,013.53		\$360,176.39	Wash. Rev. Code § 6.15.020
Enterior Concours AVD. 21.1			100% of fair market value, up to any applicable statutory limit	
Term Life Insurance (No CSV) Line from Schedule A/B: 31.1	\$1.00 ⁺		\$1.00+	Wash. Rev. Code § 48.18.41
EITE HOITI Scriedule A/D. 31.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

	otor 1 otor 2	Cynthia R. Murphy Christopher J. Rose	Case number (if known)	
3.	(Subj	you claiming a homestead exemption of more than \$189 ject to adjustment on 4/01/25 and every 3 years after that for No	•	
		Yes. Did you acquire the property covered by the exemption	on within 1,215 days before you filed this case?	
		■ No		
		□ Yes		

Fill	in this information to identify y	rour case:			
Deb	otor 1 Cynthia R. Mu	urphy			
	First Name	Middle Name Last Name		-	
Deb	otor 2 Christopher	I. Rose			
(Spo	use if, filing) First Name	Middle Name Last Name			
Uni	ted States Bankruptcy Court for t	he: EASTERN DISTRICT OF WASHINGTON		-	
Cas	se number				
(if kn				☐ Check	if this is an
				amend	ded filing
Off	icial Form 106D				
Sc	hedule D: Credito	rs Who Have Claims Secured	by Propert	V	12/15
			<u> </u>		
is ne		le. If two married people are filing together, both are equit out, number the entries, and attach it to this form. Or			
1. Do	any creditors have claims secured	by your property?			
	□ No. Check this box and subm	it this form to the court with your other schedules. Yo	ou have nothing else	to report on this form.	
	_	•	od navo notimig oloo	to roport orrano romi.	
	Yes. Fill in all of the information	on below.			
Par	t 1: List All Secured Claims		Column A	Calumn B	Column C
		as more than one secured claim, list the creditor separately		Column B	
		has a particular claim, list the other creditors in Part 2. As petical order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	7	•	value of collateral.	claim	If any
2.1	Fidelity	Describe the property that secures the claim:	\$22,690.64	\$416,013.53	\$0.00
	Creditor's Name	401K			
	100 Crochy Barkway				
	100 Crosby Parkway KC2Q	As of the date you file, the claim is: Check all that			
	Covington, KY 41015	apply. Contingent			
	Number, Street, City, State & Zip Code	Unliquidated			
	, , ,	☐ Disputed			
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.			
	Debtor 1 only	■ An agreement you made (such as mortgage or sec	ured		
	Debtor 2 only	car loan)			
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the debtors and anothe	er U Judgment lien from a lawsuit			
	Check if this claim relates to a	☐ Other (including a right to offset)			

community debt

Date debt was incurred

Last 4 digits of account number

Debtor 1 Cynthia R. Murphy		Case number (if known)		
First Name Middle N	ame Last Name			
Debtor 2 Christopher J. Rose First Name Middle N	ame Last Name			
				
2.2 Horizon Credit Union	Describe the property that secures the claim:	\$178,342.32	\$180,000.00	\$0.00
Creditor's Name	2022 Newmar Motorhome			
DO D 45400				
PO Box 15128 Spokane Valley, WA	As of the date you file, the claim is: Check all that			
99215	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Number, Street, Oily, State & Zip Sode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)	34.04		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	☐ Other (including a right to offset)			
community debt	· · · · · · · · · · · · · · · · · · ·			
Date debt was incurred	Local A digita of account number			
Date debt was incurred	Last 4 digits of account number			
2.3 Les Schwab	Describe the property that secures the claim:	\$999.00	\$1,320.00	\$0.00
Creditor's Name	Tires	Ψ333.00	ψ1,320.00	Ψ0.00
	11103			
	A distribution of the dist			
PO Box 35181	As of the date you file, the claim is: Check all that apply.			
Seattle, WA 98124-5181	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
■ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.4 Lexus Financial Services	Describe the property that secures the claim:	\$77,717.43	\$43,000.00	\$34,717.43
Creditor's Name	2022 Lexus			
PO Box 5855	As of the date you file, the claim is: Check all that			
Carol Stream, IL 60197	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Hamber, Subst, Sky, State & Zip Sode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)	- 		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1 Cynthia R. Murphy		Case number (if known)		
First Name Middle N	ame Last Name			
Debtor 2 Christopher J. Rose First Name Middle N	ame Last Name			
First Name Wildule N	arrie Last Name			
2.5 Newrez, LLC	Describe the property that secures the claim:	\$503,279.26	\$725,000.00	\$0.00
c/o Shellpoint Mortgage Servicing PO Box 650840 Dallas, TX 75265-0840	Debtors' Home 42 E. 14th Avenue Spokane, WA 99202 Spokane County As of the date you file, the claim is: Check all that apply. □ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	 An agreement you made (such as mortgage or s car loan) 	ecured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.6 Spokane Teachers Credit Union	Describe the property that secures the claim:	\$47,275.88	\$47,250.88	\$25.00
Creditor's Name	2022 Jeep			
PO Box 1954 Spokane, WA 99210	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	ecured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
■ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	\$830,304.53	ī.	
If this is the last page of your form, add	· -	\$830,304.53	7	
Write that number here:		4333,304.00	Т	
Part 2: List Others to Be Notified for	r a Debt That You Already Listed			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill	in this inform	nation to identify your case:				
De	btor 1	Cynthia R. Murphy				
			iddle Name Last Name			
1	btor 2	Christopher J. Rose				
(Spo	ouse if, filing)	First Name M	iddle Name Last Name			
Uni	ited States Ban	kruptcy Court for the: EASTI	ERN DISTRICT OF WASHINGTON			
	se number					
(if kr	nown)				_	if this is an
					amend	led filing
Of	ficial Form	106E/F				
		all and a second a	ave Unsecured Claims			12/15
			or creditors with PRIORITY claims and Part 2 fo	or creditors with NON	DDIODITY claims 1 i	
left. nam	Attach the Cont e and case num	inuation Page to this page. If you	Property. If more space is needed, copy the Part have no information to report in a Part, do not f			
		rs have priority unsecured claims				
١.	No. Go to Pa	• •	agamst you?			
	_	all Z.				
2	Yes.	mularity unaccured alaims. If a area	ditor has more than one priority unsecured claim, li	at the avaditor concrete	hufar aaab alaim Far	and alaim listed
۷.	identify what typ possible, list the	e of claim it is. If a claim has both pri	ority and nonpriority amounts, list that claim here a ng to the creditor's name. If you have more than tw	nd show both priority a	nd nonpriority amoun	ts. As much as
	(For an explanat	tion of each type of claim, see the ins	structions for this form in the instruction booklet.)			
				Total claim	Priority amount	Nonpriority amount
2.1		ate Tax Commission	Last 4 digits of account number	\$2,412.27	\$2,412.27	\$0.00
	Priority Cre PO Box	ditor's Name	When was the debt incurred?			
	Boise, II		when was the debt incurred:			
		reet City State Zip Code	As of the date you file, the claim is: Check a	all that apply		
	Who incurred	the debt? Check one.	☐ Contingent			
	Debtor 1 or	nly	☐ Unliquidated			
	Debtor 2 or	nly	☐ Disputed			
	Debtor 1 ar	nd Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one	e of the debtors and another	☐ Domestic support obligations			
	Check if th	nis claim is for a community debt	■ Taxes and certain other debts you owe the	government		
		ubject to offset?	☐ Claims for death or personal injury while yo	ou were intoxicated		
	■ No	-	☐ Other. Specify			
	☐ Yes		2022 State of Idaho	Tax		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 10

Debtor 1 Cynthia R. Murphy Debtor 2 Christopher J. Rose	Case number (if known)				
2.2 United States of America	Last 4 digits of account number	\$253,317.80	\$253,317.80	\$0.00	
Priority Creditor's Name Internal Revenue Service Kansas City, MO 64999-0149	When was the debt incurred?			·	
Number Street City State Zip Code	As of the date you file, the claim is: Check all	that apply			
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:				
☐ At least one of the debtors and another	☐ Domestic support obligations				
■ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the g	jovernment			
Is the claim subject to offset?	☐ Claims for death or personal injury while you	were intoxicated			
■ No	☐ Other. Specify				
Yes	2020 (\$78,219.72) 20 (\$55,000)	22 (\$120,098.08)	2023		
United States of America Priority Creditor's Name	Last 4 digits of account number	\$0.00	\$0.00	\$0.00	
Internal Revenue Service Centralized Insolvency Operation PO Box 7346	When was the debt incurred?				
Philadelphia, PA 19101	A control of the cont				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all	that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim: ☐ Domestic support obligations				
☐ At least one of the debtors and another	_				
■ Check if this claim is for a community debt	Taxes and certain other debts you owe the g				
Is the claim subject to offset?	☐ Claims for death or personal injury while you	were intoxicated			
■ No	Other. Specify Notice only				
Yes					
4 United States of America Priority Creditor's Name	Last 4 digits of account number	\$0.00	\$0.00	\$0.00	
Internal Revenue Service 915 W Second Avenue Suite 3260	When was the debt incurred?				
Seattle, WA 98174					
Number Street City State Zip Code	As of the date you file, the claim is: Check all	that apply			
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	Unliquidated				
Debtor 2 only	Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:				
☐ At least one of the debtors and another	☐ Domestic support obligations				
■ Check if this claim is for a community debt	Taxes and certain other debts you owe the g				
Is the claim subject to offset?		were intoxicated			
No					
Is the claim subject to offset?	☐ Claims for death or personal injury while you ☐ Other. Specify				

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

	btor 1 Cynthia R. Murphy Christopher J. Rose	Case number (if known	n)		
2.5		Last 4 digits of account number	50.00	\$0.00	\$0.00
	Priority Creditor's Name Attorney General, Merrick Garland	When was the debt incurred?			
	950 Pennsylvania Ave NW Washington, DC 20530				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	■ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government			
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicate	ted		
	■ No	Other. Specify			
	□Yes	Notice only			
2.6	United States of America	Last 4 digits of account number	50.00	\$0.00	\$0.00
	Priority Creditor's Name Internal Revenue Service PO Box 742562	When was the debt incurred?			
	Cincinnati, OH 45280				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	■ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government			
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxical	ted		
	■ No	☐ Other. Specify			
	Yes	Notice only			
Pa	rt 2: List All of Your NONPRIORITY Unsecu	red Claims			
3.	Do any creditors have nonpriority unsecured claim	s against you?			
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other schedules.			
	Yes.				
4.	unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other	alphabetical order of the creditor who holds each claim. If a laim. For each claim listed, identify what type of claim it is. Do no creditors in Part 3.If you have more than three nonpriority unsec	t list claims alread	dy included in Part	1. If more
	Part 2.			Total claim	

i otai ciaim

American Express National Bank Nonpriority Creditor's Name	Last 4 digits of account number 8823	\$34,756.0
PO Box 297871	When was the debt incurred?	
Fort Lauderdale, FL 33329 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Charges	
American Express National Bank	Last 4 digits of account number 2223	\$2,521.0
Nonpriority Creditor's Name PO Box 297871	When was the debt incurred?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Fort Lauderdale, FL 33329 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
Debtor 1 only		
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Charges	
Bankers Health Group	Last 4 digits of account number 5453	\$74,579.3
Nonpriority Creditor's Name 10234 W. State Road 84 Davie, FL 33324	When was the debt incurred? 8/1/20	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Physician Loan	

Citibank	Last 4 digits of account number	\$1,971.0
Nonpriority Creditor's Name	When was the debt incurred?	
Salt Lake City, UT 84131		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
ebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Charges	
Greenberg Law	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name	When was the debt incurred?	
Alperstein & Associates 314 Cherry Avenue	when was the debt incurred?	
Vorhees, NJ 08403		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
lebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify Notice only	
n DebtEd Mail Processing Center	Last 4 digits of account number	\$47,765.00
Nonpriority Creditor's Name	When was the debt incurred?	
Farmington, MO 63640	When was the dest incurred:	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	Student loans	
Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
s the claim subject to onset?		
No	☐ Debts to pension or profit-sharing plans, and other similar debts	

		
.ightStream Ionpriority Creditor's Name	Last 4 digits of account number 2482	\$45,000.00
PO Box 849	When was the debt incurred?	
Vilson, NC 27894		
lumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
ebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Loan	
MultiCare Health System	Last 4 digits of account number	\$910.00
Ionpriority Creditor's Name O Box 34883	When was the debt incurred?	
Seattle, WA 98124	When was the debt incurred:	
lumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
ebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
lelNet	Last 4 digits of account number	Unknown
lonpriority Creditor's Name		
O Box 82561	When was the debt incurred?	
Lincoln, NE 68501-2561 lumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.	у	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	■ Student loans	
Check if this claim is for a community ebt	Dobligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
tilo olalii oabjoot to olloot.		
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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Numerica Credit Union	Last 4 digits of account number	\$14,186.0
Nonpriority Creditor's Name		
PO Box 6011 Spokane, WA 99207	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only		
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	Unliquidated	
,	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	
Prosper	Last 4 digits of account number 1215	\$25,000.0
Nonpriority Creditor's Name		
PO Box 650078	When was the debt incurred?	
Dallas, TX 75265 Number Street City State Zip Code	As of the date year file the plains in Chapter all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	_	
Debtor 2 only	Contingent	
_	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Loan	
State Collection Service, Inc.	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name		
PO Box 6250	When was the debt incurred?	
Madison, WI 53716-0250 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	у	
☐ Debtor 1 only	Пол	
☐ Debtor 2 only	☐ Contingent	
_	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
— INU		
□Yes	Assigned for Multicare Health System Other. Specify Notice only	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

STCU	Last 4 digits of account number	\$9,830.4
Nonpriority Creditor's Name 620 N. Signal Drive	When was the debt incurred?	
Liberty Lake, WA 99019 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 2 only	Contingent	
■ Debtor 1 and Debtor 2 only	Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
Synchrony Bank	Last 4 digits of account number 8054	\$4,000.
Nonpriority Creditor's Name PO Box 965036	When was the debt incurred?	+ -,
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam's. Oncook all that apply	
☐ Debtor 1 only	Поль	
☐ Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Upstart Customers Bank	Last 4 digits of account number 4991	\$50,285.
Nonpriority Creditor's Name Customers Bank Loan Operation	When was the debt incurred?	<u> </u>
PO Box 1503 San Carlos, CA 94070		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

	Christopher J. Rose		
4.1	Wells Fargo, N.A.	Last 4 digits of account number	\$4,679.88
6	Nonpriority Creditor's Name PO Box 522	When was the debt incurred?	Ψ4,010.00
	Des Moines, IA 50306-0572 Number Street City State Zip Code	As of the data you file the claim is Check all that analy	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	☐ Contingent	
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Other Specify	
4.1 7	Wells Fargo, N.A.	Last 4 digits of account number 7126	\$3,384.77
	Nonpriority Creditor's Name PO Box 51193 Los Angeles, CA 90051-5493	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Charges	
4.1	Zwicker & Associates	Local Addinition of account number	\$0.00
8	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.00
	Aaron McLellan 12550 SE 93rd Ave #430	When was the debt incurred?	
	Clackamas, OR 97015 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only		
	■ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim:		
	■ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Assigned for American Express Other. Specify Notice only	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1	Cynthia R. Murphy		
Debtor 2	Christopher J. Rose	Case number (if known)	

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 255,730.07
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 255,730.07
				Total Claim
Total .	6f.	Student loans	6f.	\$ 0.00
laims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 318,869.19
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 318,869.19

Fill in this information to identify your case:							
Debtor 1	Cynthia R. Murph	у					
	First Name	Middle Name	Last Name				
Debtor 2	Christopher J. Ro	se					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT O	F WASHINGTON				
Case number					☐ Check if this is an amended filing		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Hayford Road Storage
10808 W. 49th Avenue
Spokane, WA 99224

State what the contract or lease is for
Month-to-Month storage lease requiring payments in the sum of \$500.00 per month.

Fill in thi	s information to identify your case:	
Debtor 1	Cynthia R. Murphy First Name Middle Name Last N	
Debtor 2		ane
(Spouse if, fi	Christopher J. Rose ling) First Name Middle Name Last N	ame
	TACTEDIA DICTRICT OF WACHING	011
United St	ates Bankruptcy Court for the: EASTERN DISTRICT OF WASHINGT	<u>ON</u>
Case nun	nber	
(if known)		☐ Check if this is an
		amended filing
O((; ·	15 40011	
Officia	al Form 106H	
Sched	dule H: Your Codebtors	12/15
people are fill it out, a your name	s are people or entities who are also liable for any debts you may he efiling together, both are equally responsible for supplying correct and number the entries in the boxes on the left. Attach the Addition e and case number (if known). Answer every question.	information. If more space is needed, copy the Additional Page, al Page to this page. On the top of any Additional Pages, write
	,	
■ No		
☐ Ye	es	
	thin the last 8 years, have you lived in a community property state on na, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Tex	
_		,
□ No	o. Go to line 3.	
■ Ye	es. Did your spouse, former spouse, or legal equivalent live with you at the	e time?
	П.,	
	□ No	
	Yes.	
	In which community state or territory did you live? Christopher J. Rose 42 E. 14th Avenue	hington . Fill in the name and current address of that person.
	Spokane, WA 99202	
	Name of your spouse, former spouse, or legal equivalent	
	Number, Street, City, State & Zip Code	
	In which community state or territory did you live? Cynthia R. Murphy 42 E. 14th Avenue Spokane, WA 99202 Name of your spouse, former spouse, or legal equivalent	hington . Fill in the name and current address of that person.
	Number, Street, City, State & Zip Code	
in lin Form	olumn 1, list all of your codebtors. Do not include your spouse as a e 2 again as a codebtor only if that person is a guarantor or cosign n 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Column 2.	er. Make sure you have listed the creditor on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1		☐ Schedule D, line
J. 1	Name	Schedule E/F, line
		☐ Schedule C, line
	Number Street City State ZIP Co	ode
3.2		Schedule D, line
	Name	☐ Schedule E/F, line
Official F	orm 106H Schedule	H: Your Codebtors Page 1 of 2

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Debtor 1	Christop	her J. Rose		se number (if known)				
	Additional I	Page to List Me	ore Codebtors					
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt Check all schedules that apply:			
					☐ Schedule G, line			
	Number	Street						
	City		State	ZIP Code				

Official Form 106H Schedule H: Your Codebtors Page 2 of 2

							_					
Fill	in this information to ide	entify your ca	ase:									
Del	btor 1 Cy	ynthia R. M	lurphy	_								
	otor 2 use, if filing) Christopher J. Rose											
Uni	ited States Bankruptcy	Court for the	: EASTERN DISTRICT	OF WASHINGTON								
	se number nown)					Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:						
0	fficial Form 10	061								iollowing date.		
	chedule I: Yo		ome					MM / DD/ Y	YYY		12/15	
sup spo atta	plying correct informatuse. If you are separat	ation. If you ted and you this form.	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse ide infor	is liv mati	/ing w	vith you, included the sout your spo	ude infor ouse. If m	mation about nore space is	your needed,	
1.	Fill in your employm information.	Fill in your employment nformation.			Debtor 1				Debtor 2 or non-filling spouse			
	If you have more than	ate page with	Employment status	■ Employed				■ Emplo	■ Employed			
	information about add		Employment status	☐ Not employed				☐ Not employed				
	employers.		Occupation	Physician				Semi-Retired				
	Include part-time, sea self-employed work.	isonal, or	Employer's name	Providence Sacred Heart				Washington State				
	Occupation may inclu or homemaker, if it ap		Employer's address	101 W. 8th Spokane, WA 99204				_				
			How long employed the	nere? 11.5 ye	ears							
Pai	rt 2: Give Details	About Mon	thly Income									
spoi	use unless you are sepa	arated. use have mo	ore than one employer, cothis form.	·	·	•	oyers	for that perso	on on the	lines below. If y	J	
							For	Debtor 1		ebtor 2 or ling spouse		
2.	List monthly gross wages, salary, and commissions (bed deductions). If not paid monthly, calculate what the monthly				2.	\$		35,110.38	\$	150.00		
3.	Estimate and list monthly overtime pay.				3.	+\$		0.00	+\$	0.00		
4.	. Calculate gross Income. Add line 2 + line 3.				4.	\$	3	5,110.38	\$	150.00		

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

				For	Debtor 1		ebtor 2 or	
	Conv	y line 4 here	4.	\$	35,110.38	non-f	iling spouse 150.00	
	ООРУ	y into 4 horo	·····	Ψ_	33,110.30	Ψ	130.00	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	6,276.30	\$	559.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: Estimated taxes on Kootenai	Income 5h.+	\$	7,000.00	+ \$	0.00	
6.	Add f	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	13,276.30	\$	559.00	
7.	Calcı	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	21,834.08	\$	-409.00	
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a busines profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	i e	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a cregularly receive Include alimony, spousal support, child support, maintenance, divisettlement, and property settlement.	dependent	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	0.00	
	8e.	Social Security	8e.	\$_	0.00	\$	2,423.20	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash that you receive, such as food stamps (benefits under the Suppler Nutrition Assistance Program) or housing subsidies. Specify:		\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	2,423.20	
10.		ulate monthly income. Add line 7 + line 9.	10. \$	2	1,834.08 + \$_	2,01	4.20 = \$ 23,848.2	28
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Includ other	e all other regular contributions to the expenses that you list in de contributions from an unmarried partner, members of your house refriends or relatives. ot include any amounts already included in lines 2-10 or amounts the cify:	ehold, your depend				hedule J. 11. +\$0.0	00
12.		the amount in the last column of line 10 to the amount in line 1 that amount on the Summary of Schedules and Statistical Summa es					12. \$ 23,848.2 Combined	28
	_						monthly income	9
13.	Do yo	ou expect an increase or decrease within the year after you file	this form?					
		No.						
		Yes. Explain:						

Fill	in this informa	ation to identify yo	our case:	·		1		
	otor 1	Cynthia R. N				Che	ck if this is:	
		Oyntina IX. IV	шрпу				An amended filing	
	otor 2 ouse, if filing)	Christopher	J. Rose					wing postpetition chapter the following date:
``								
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF WASHI	INGTON		MM / DD / YYYY	
	e number nown)							
		orm 106J						
		J: Your						12/1
info	ormation. If m		eded, atta	. If two married people a ch another sheet to this n.				
Par		ribe Your House	hold					
1.	Is this a joir							
	□ No. Go to		in a canar	ata hausahald?				
	_	es Debtor 2 live	ın a separ	ate nousenoid?				
	■ N □ Y		st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						□ Yes □ No
								☐ Yes
								□ No
								Yes
								□ No □ Yes
3.	Do your exp	penses include		No				□ Yes
		f people other t d your depende	han 📕	Yes				
Par		ate Your Ongoi						
exp	imate your ex enses as of a plicable date.	a date after the l	our bankri bankruptc	uptcy filing date unless y y is filed. If this is a sup	you are using this f plemental <i>Schedul</i> e	orm as a si e <i>J</i> , check t	upplement in a Cha he box at the top o	apter 13 case to report of the form and fill in the
				government assistance				
	value of sucl ficial Form 10		d have inc	cluded it on Schedule I:	Your Income		Your exp	enses
(,				_		
4.		or home owners and any rent for the		ses for your residence. or lot.	Include first mortgag	e 4. :	\$	3,570.00
	If not includ	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	0.00
				ıpkeep expenses		4c.		150.00
5		owner's associat			omo oquity loons	4d. 5.	·	0.00
5.	Auditional	nortgage payme	ente for yo	our residence, such as ho	me equity loans	Э.	Ψ	0.00

Cynthia R. Murphy Debtor 1 Debtor 2 Christopher J. Rose Case number (if known) **Utilities:** Electricity, heat, natural gas 6a. 6a. \$ 320.00 6b. Water, sewer, garbage collection 6b. \$ 200.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 750.00 6d. Other. Specify: Security 6d. \$ 100.00 Food and housekeeping supplies 7. \$ 7. 2,000.00 Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning 9. \$ 20.00 10. Personal care products and services 10. \$ 100.00 11. Medical and dental expenses 11. \$ 600.00 12. Transportation. Include gas, maintenance, bus or train fare. 600.00 12. \$ Do not include car payments. 13. \$ 13. Entertainment, clubs, recreation, newspapers, magazines, and books 200.00 14. Charitable contributions and religious donations 14. \$ 40.00 15 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. \$ 15a. Life insurance 0.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 447.00 15d. \$ 15d. Other insurance. Specify: 0.00 16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 1,529.00 17b. Car payments for Vehicle 2 17b. \$ 833.66 17c. Other. Specify: Horizon CU RV
17d. Other. Specify: Fidelity 401K Plan 17c. \$ 1.567.00 17d. \$ 523.18 Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. 1,500.00 19. Specify: Elder Care Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 0.00 20a. \$ 20b. Real estate taxes 20b. \$ 0.00 20c. \$ 20c. Property, homeowner's, or renter's insurance 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Out of Town Work Expenses (i.e. hotel during bad 1.000.00 21. +\$ weather) 500.00 Storage Unit +\$ House assistance +\$ 600.00 Dog sitting +\$ 700.00 Pet food/vet/meds +\$ 200.00 Les Schwab +\$ 75.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. \$ 18,124.84 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 18,124.84 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23,848.28 23b. Copy your monthly expenses from line 22c above. 23b. 18,124.84 23c. Subtract your monthly expenses from your monthly income. 5.723.44 23c. The result is your monthly net income. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ■ No. ☐ Yes. Explain here:

Fill in this inform	nation to identify your	casa			1	
	•					
Debtor 1	Cynthia R. Murph		Loot Nove			
Dobtor 2		Middle Name	Last Nam	9		
Debtor 2 (Spouse if, filing)	Christopher J. Ro	Middle Name	Last Nam	<u> </u>		
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	F WASHINGTO	N		
Case number						
(if known)					☐ Check if this is ar amended filing	1
ou must file this obtaining money	s form whenever you f	ile bankruptcy schedules	s or amended so		atement, concealing property 000, or imprisonment for up	
Sigr	n Below					
Did you pay	y or agree to pay some	one who is NOT an attor	rney to help you	fill out bankruptcy forms?		
■ No						
☐ Yes. N	lame of person				nkruptcy Petition Preparer's N on, and Signature (Official Forn	
	Ity of perjury, I declare e true and correct.	that I have read the sum	mary and sched	lules filed with this declara	tion and	
X /s/ Cyn	thia R. Murphy		X /s/	Christopher J. Rose		
	a R. Murphy e of Debtor 1			ristopher J. Rose nature of Debtor 2		
Date	2/15/2024		Dat	e 2/15/2024		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Fill in this i	nformation to identify you	r case:			
Debtor 1	Cynthia R. Murp				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Christopher J. R	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF	WASHINGTON		
Case number	er				
(if known)				-	heck if this is an mended filing
Official	Form 107				
Statem	ent of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22
				equally responsible for supp	
	. If more space is needed, (nown). Answer every que		this form. On the top of an	y additional pages, write you	r name and case
Part 1: G	Give Details About Your Ma	arital Status and Where You	Lived Before		
			2.704 201010		
1. What is	s your current marital statu	IS?			
■ Ma	arried				
	ot married				
2. During	the last 3 years, have you	lived anywhere other than	where you live now?		
■ No					
		ived in the last 3 years. Do no	ot include where you live nov	<i>ı</i> .	
Debto		ŕ	Debtor 2 Prior Ac		Datas Dahtar 2
Debto	r 1:	Dates Debtor 1 lived there	Debtor 2 Prior At	aress:	Dates Debtor 2 lived there
3. Within	the last 8 years, did you ev	ver live with a spouse or led	al equivalent in a commun	ity property state or territory	? (Community property
				co, Texas, Washington and W	
□ No)				
■ Ye	es. Make sure you fill out Scl	hedule H: Your Codebtors (Of	ficial Form 106H).		
Dowl O	toulate the Occurred of Wass				
Part 2	explain the Sources of You	r income			
		nployment or from operatin u received from all jobs and a		ear or the two previous calent	dar years?
If you a	re filing a joint case and you	have income that you receive	e together, list it only once ur	nder Debtor 1.	
☐ No)				
■ Ye	es. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
Erom law:	ory 4 of assurant second second	_	,		,
	ary 1 of current year until u filed for bankruptcy:	Wages, commissions, bonuses, tips	\$34,311.54	☐ Wages, commissions, bonuses, tips	\$0.00
		☐ Operating a business		☐ Operating a business	

Official Form 107 Statement of F

Statement of Financial Affairs for Individuals Filing for Bankruptcy

				Debtor 1					Debtor 2		
					of income that apply.	(be	oss income efore deductions clusions)	and	Sources of ind Check all that a		Gross income (before deductions and exclusions)
	r last calen nuary 1 to	dar year: December 3	31, 2023)	■ Wages	, commissions, tips		\$424,18	4.72	☐ Wages, con bonuses, tips	nmissions,	\$0.00
				☐ Operat	ing a business				Operating a	business	
		dar year bef December 3		■ Wages	, commissions, tips		\$587,04	4.13	☐ Wages, con bonuses, tips	nmissions,	\$0.00
				☐ Operat	ing a business				☐ Operating a	business	
5.	Include include and other winnings.	come regard public benef If you are fili	less of wheth it payments; ing a joint cas ine gross inco	ner that inco pensions; re se and you h	ental income; inte nave income that	ample: erest; d you re	s of other incom lividends; money ceived together	e are a collect list it o		royalties; and ebtor 1.	ecurity, unemployment, d gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe b		eac (be	oss income fro ch source efore deductions clusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
		1 of currer iled for ban					\$	0.00	SSI		\$4,846.00
	r last calen nuary 1 to	dar year: December 3	31, 2023)				\$	0.00	SSI		\$25,829.10
		dar year bef December 3		401K Lo	an		\$58,00	0.00	SSI		\$25,912.00
Par	•				re You Filed for						
6.		Neither De	btor 1 nor D	ebtor 2 has	marily consume s primarily cons amily, or househo	umer d	debts. Consum	er debts	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the No.	90 days befo	•	for bankruptcy, d	lid you	pay any credito	r a total	l of \$7,575* or mo	re?	
		□ Yes	paid that cr	editor. Do n		nts for	domestic suppo				ne total amount you nd alimony. Also, do
		* Subject t						iled on	or after the date of	of adjustment	
	■ Yes.				e primarily const for bankruptcy, d			r a total	of \$600 or more	?	
		No.	Go to line 7								
		□ Yes	include pay		omestic support o				I the total amount port and alimony.		t creditor. Do not nclude payments to an
	Creditor'	s Name and	Address		Dates of payme	ent	Total amo		Amount you	Was this p	payment for
							р	aid	still owe		

	btor 1 btor 2	Cynthia R. Murphy Christopher J. Rose		Cas	e number (if known)		
7.	<i>Inside</i> of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners; relatives of any gen- control, or owner of 20% of	eral partners; partner more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one fo
		No Yes. List all payments to an insider.					
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	inside Includ	n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a de	ebt that benefited an
		Yes. List all payments to an insider					
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Po	rt 4:	Identify Legal Actions, Repossession	ond Forcelecures				
9.	List al modifi	n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes.					
		No					
		Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	e case
	Cyn: Mur	erican Express National Bank v. thia Murphy aka Cynthia R. phy 04617-32	Civil	State of Washin Spokane Count Superior Court Answer filed. N	ty	■ Pending □ On appe □ Conclude	
10.	Check	n 1 year before you filed for bankruptok all that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	hed, attached	I, seized, or levied?
		No. Go to line 11. Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property		Date		Value of the property
			Explain what happened				property
11.	accol	n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fin	nancial institution	, set off any a	mounts from your
	Cred	litor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a No Yes		rty in the possessi	ion of an assigne	e for the bene	efit of creditors, a

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

	btor 1 Cynthia R. Murphy btor 2 Christopher J. Rose	Case number	(if known)	
Pai	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	han \$600 per person?	•
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	cy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or contr	ibution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	or gambling?	y or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	☐ Yes. Fill in the details.			
	how the loss occurred Inc	scribe any insurance coverage for the loss slude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	1115	urance claims on line 33 of 3chedule AVB. Froperty.		
Pai	rt 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prep	y, did you or anyone else acting on your behalf pay oparing a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was	Amount of payment
	Email or website address Person Who Made the Payment, if Not You		made	
	Southwell & O'Rourke 421 W. Riverside Avenue Suite 960	See 2016 Disclosure		
	Spokane, WA 99201 kevin@southwellorourke.com			
17.			or transfer any prope	rty to anyone who
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Greenberg Law Alperstein & Associates 314 Cherry Avenue Vorhees, NJ 08403	Debt management	\$2,500 per month for approximately 1 year	\$30,000.00

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already include yes. Fill in the details.	iness or financial affairs? e as security (such as the g	•		
	Person Who Received Transfer	Description and value	of D	escribe any property or	Date transfer was
	Address	property transferred	р	ayments received or debts aid in exchange	made
	Person's relationship to you				
	Ruth Murphy Disabled Mother		ir e	ebtors paying ndependent living xpenses average 1,900/month	Last 3 years
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-protein No ☐ Yes. Fill in the details.		operty to a self-s	ettled trust or similar device	of which you are a
	Name of trust	Description and value	of the property	transferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit Box	xes, and Storage	Units	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial accounts;	certificates of de		, ,
		and Authorities of Trans		Data an annut man	1 (1: -1-::
			pe of account or strument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for ban	kruptcy, any saf	e deposit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access Address (Number, Street, State and ZIP Code)		ribe the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your hon	ne within 1 year I	pefore you filed for bankrupto	cy?
	□ No				
	Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had a to it? Address (Number, Street, State and ZIP Code)		ribe the contents	Do you still have it?
	Hayford Road Storage 10808 W. 49th Avenue Spokane, WA 99224	Cynthia Murphy and Christopher Rose 42 E. 14th Avenue Spokane, WA 99202	Stuff	Drift and Household	□ No ■ Yes

Debtor 1 **Cynthia R. Murphy**Debtor 2 **Christopher J. Rose**

Case number (if known)

Pai	rt 9: Identify Property You Hold or Control fo	r Someone Else		
23.	Do you hold or control any property that some for someone.	eone else owns? Include any proper	rty you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	rt 10: Give Details About Environmental Inform	mation		
For	the purpose of Part 10, the following definition	s apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these si	air, land, soil, surface water, ground	<u> </u>	
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,
Rep	oort all notices, releases, and proceedings that	you know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that you	ou may be liable or potentially liable	e under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	ny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admir	nistrative proceeding under any env	ironmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pa	rt 11: Give Details About Your Business or Co	onnections to Any Business		
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have ar	ny of the following connections to an	y business?
	■ A sole proprietor or self-employed in a	a trade, profession, or other activity	, either full-time or part-time	
	☐ A member of a limited liability compar	ny (LLC) or limited liability partnersh	nip (LLP)	
	☐ A partner in a partnership			
	lacksquare An officer, director, or managing exec	utive of a corporation		
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

	tor 1 Cynthia R. Murphy tor 2 Christopher J. Rose		Case number (if known)
	□ No. None of the above applies. Go to		
	Yes. Check all that apply above and fi Business Name Address (Number, Street, City, State and ZIP Code)	Il in the details below for each business. Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
	Cynthia Murphy, Sole Proprietor	Sole Proprietor Neurologist for Kootenai Health	EIN: From-To 9/2018 to present
	institutions, creditors, or other parties.	otcy, did you give a financial statement to	anyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part	112: Sign Below		
are to with 18 U	rue and correct. I understand that making a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property, or \$250,000, or imprisonment for up to 20 y	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection rears, or both.
	Cynthia R. Murphy nthia R. Murphy	/s/ Christopher J. Rose Christopher J. Rose	
	nature of Debtor 1	Signature of Debtor 2	
Date	e <u>2/15/2024</u>	Date <u>2/15/2024</u>	
Did y ■ No	•	nent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?
Did y ■ N	you pay or agree to pay someone who is no o	ot an attorney to help you fill out bankrup	tcy forms?
LÌ Y∈	es. Name of Person Attach the <i>Bankr</i>	uptcy Petition Preparer's Notice, Declaration	, and Signature (Official Form 119).

Fill in this info	rmation to identify your case:	
Debtor 1	Cynthia R. Murphy	
Debtor 2 (Spouse, if filing	Christopher J. Rose	
United States B	ankruptcy Court for the: Eastern District of Washington	
Case number (if known)		☐ Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/21

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11 (other than Subchapter V). If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - ☐ Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					umn A otor 1	Colum Debto	
2. Your gross wages, salary, tips, payroll deductions).	bonuses, ove	rtime, a	nd commissions (before all	\$	30,013.07	\$	0.00
 Alimony and maintenance paym Column B is filled in. 	nents. Do not i	nclude p	payments from a spouse if	\$	0.00	\$	0.00
 All amounts from any source who f you or your dependents, include from an unmarried partner, member and roommates. Include regular of filled in. Do not include payments in the control of t	uding child su ers of your hou ontributions fro you listed on li	i pport. isehold, m a spo	Include regular contributions your dependents, parents, buse only if Column B is not	\$	0.00	\$	0.00
business, profession, or farm	Debtor 1		Debtor 2				
Gross receipts (before all deduction	ons)	\$	14,496.51				
Ordinary and necessary operating	expenses	-\$_	522.50				
Net monthly income from a busine profession, or farm	ess,	\$_	Copy 13,974.01 here ->	\$_	13,974.01	\$	0.00
6. Net income from rental and other real property	Debtor 1		Debtor 2				
Gross receipts (before all deduction	ons)		\$ 0.00				
Ordinary and necessary operating	expenses		-\$ 0.00				
Net monthly income from rental or	other real proj	perty	\$ 0.00 Copy here ->	\$	0.00	\$	0.00

Case number (if known)

	Christopher J. Rose			Column	Δ	Column	n R	
				Debtor '		Debtor	_	
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
В.	Unemployment compensation			\$	0.00	\$	0.00	_
	Do not enter the amount if you contend t the Social Security Act. Instead, list it he		was a benefit und	er				
	For you	\$	0.00					
	For your spouse	\$	0.00					
	benefit under the Social Security Act. Als not include any compensation, pension,			0				
	United States Government in connection disability, or death of a member of the ur pay paid under chapter 61 of title 10, the does not exceed the amount of retired pair retired under any provision of title 10 or	niformed services. If you in include that pay only to ay to which you would ot	received any retire the extent that it herwise be entitled		0.00	\$	0.00	-
10.	United States Government in connection disability, or death of a member of the ur pay paid under chapter 61 of title 10, the does not exceed the amount of retired page 10.	niformed services. If you in include that pay only to ay to which you would of ther than chapter 61 of the dabove. Specify the safer the Social Security Ame against humanity, or an in with a disability, combaniformed services. If nec	received any retire of the extent that it herwise be entitled nat title. Durce and amount. It; payments international or lowance paid by the t-related injury or	\$	0.00	\$	0.00	-
10.	United States Government in connection disability, or death of a member of the ur pay paid under chapter 61 of title 10, the does not exceed the amount of retired paif retired under any provision of title 10 or Income from all other sources not list Do not include any benefits received under eceived as a victim of a war crime, a cridomestic terrorism; or compensation, pe United States Government in connection disability, or death of a member of the ur	niformed services. If you in include that pay only to ay to which you would of ther than chapter 61 of the dabove. Specify the safer the Social Security Ame against humanity, or an in with a disability, combaniformed services. If nec	received any retire of the extent that it herwise be entitled nat title. Durce and amount. It; payments international or lowance paid by the t-related injury or	\$	0.00	\$ \$	0.00	-
10.	United States Government in connection disability, or death of a member of the ur pay paid under chapter 61 of title 10, the does not exceed the amount of retired paif retired under any provision of title 10 or Income from all other sources not list Do not include any benefits received under eceived as a victim of a war crime, a cridomestic terrorism; or compensation, pe United States Government in connection disability, or death of a member of the ur	niformed services. If you in include that pay only to ay to which you would of ther than chapter 61 of the dabove. Specify the safer the Social Security Ame against humanity, or an in with a disability, combaniformed services. If nec	received any retire of the extent that it herwise be entitled nat title. Durce and amount. It payments international or lowance paid by the t-related injury or	\$	0.00	-	0.00	-
10.	United States Government in connection disability, or death of a member of the ur pay paid under chapter 61 of title 10, the does not exceed the amount of retired paif retired under any provision of title 10 or Income from all other sources not list Do not include any benefits received under eceived as a victim of a war crime, a cridomestic terrorism; or compensation, pe United States Government in connection disability, or death of a member of the ur	niformed services. If you in include that pay only to ay to which you would of ther than chapter 61 of the dabove. Specify the start he Social Security Ame against humanity, or an informed services. If nectotal below.	received any retire of the extent that it herwise be entitled nat title. Durce and amount. It payments international or lowance paid by the t-related injury or	\$		\$		-
	United States Government in connection disability, or death of a member of the ur pay paid under chapter 61 of title 10, the does not exceed the amount of retired pair fretired under any provision of title 10 or Income from all other sources not list Do not include any benefits received under eceived as a victim of a war crime, a cri domestic terrorism; or compensation, or United States Government in connection disability, or death of a member of the ur sources on a separate page and put the	niformed services. If you in include that pay only to ay to which you would of ther than chapter 61 of the dabove. Specify the stern the Social Security Ame against humanity, or an with a disability, combaniformed services. If nectotal below.	received any retire of the extent that it herwise be entitled nat title. Durce and amount. It payments international or lowance paid by the t-related injury or	\$	0.00	\$ \$	0.00	- - -
	United States Government in connection disability, or death of a member of the ur pay paid under chapter 61 of title 10, the does not exceed the amount of retired paif retired under any provision of title 10 or Income from all other sources not list Do not include any benefits received under eceived as a victim of a war crime, a cridomestic terrorism; or compensation, pe United States Government in connection disability, or death of a member of the ur sources on a separate page and put the	niformed services. If you in include that pay only to ay to which you would of ther than chapter 61 of the dabove. Specify the start he Social Security Ame against humanity, or an with a disability, combaniformed services. If nectotal below.	received any retire of the extent that it herwise be entitled nat title. Durce and amount. It payments international or lowance paid by the t-related injury or	\$	0.00	\$ \$	0.00	-

Debtor 1 Debtor 2	Cynthia R. Murphy Christopher J. Rose		Case number (if known)	
Part 2:	Sign Below By signing here, under penalty of perjury I dec	clare that the information	on this statement and in any attachments is true	e and correct.
	X /s/ Cynthia R. Murphy Cynthia R. Murphy Signature of Debtor 1	x	/s/ Christopher J. Rose Christopher J. Rose Signature of Debtor 2	
Da	ate 2/15/2024 MM / DD / YYYY	Date	·	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Washington

In re	Cynthia R. Murphy Christopher J. Rose		Case No.		
	<u> </u>	Debtor(s)	Chapter	11	
	DISCLOSURE OF COM	PENSATION OF ATTO	RNEY FOR DI	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptcy	, or agreed to be paid	to me, for services r	
	For legal services, I have agreed to accept			*	
	Prior to the filing of this statement I have received	ived	\$	*	
	Balance Due		\$	*	
2.	\$_1738.00 of the filing fee has been paid.	*\$9,014.70 received for pr	re-petition fees, c	osts, and filing fe	e.
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:	\$400.00 per hour plus cos	sts and fees.		
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed	compensation with any other person	unless they are mem	bers and associates of	of my law firm.
	☐ I have agreed to share the above-disclosed comcopy of the agreement, together with a list of the				law firm. A
6.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspec	ets of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, schedules c. Representation of the debtor at the meeting of c d. [Other provisions as needed] 	s, statement of affairs and plan which	h may be required;	-	kruptcy;
7.	By agreement with the debtor(s), the above-disclose	ed fee does not include the following	g service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement cankruptcy proceeding.		or payment to me for r	epresentation of the	debtor(s) in
:	2/15/2024	/s/ Kevin O'Rour	ke		
\overline{L}	ate	Kevin O'Rourke			
		Signature of Attorn Southwell & O'R			
		421 W. Riverside			
		Suite 960			
		Spokane, WA 99			
		509-624-0159 Fa kevin@southwel			
		Name of law firm	iiorourke.com		
		Tianic of two film			

United States Bankruptcy Court Eastern District of Washington

Cynthia R. Murphy

In re Christopher J. Rose		Case No.	
	Debtor(s)	Chapter	11
VE	RIFICATION OF CREDITOR	MATRIX	
ne above-named Debtors hereby veri	fy that the attached list of creditors is true and c	orrect to the best	of their knowledge.
Date: _ 2/15/2024	/s/ Cynthia R. Murphy		
	Cynthia R. Murphy		
	Signature of Debtor		
Date: 2/15/2024	/s/ Christopher J. Rose		
	Christopher J. Rose		

Signature of Debtor

CYNTHIA R. MURPHY 42 E. 14TH AVENUE SPOKANE, WA 99202

CHRISTOPHER J. ROSE 42 E. 14TH AVENUE SPOKANE, WA 99202

KEVIN O'ROURKE SOUTHWELL & O'ROURKE 421 W. RIVERSIDE AVENUE SUITE 960 SPOKANE, WA 99201

AMERICAN EXPRESS NATIONAL BANK PO BOX 297871 FORT LAUDERDALE, FL 33329

BANKERS HEALTH GROUP 10234 W. STATE ROAD 84 DAVIE, FL 33324

CITIBANK PO BOX 31293 SALT LAKE CITY, UT 84131

FIDELITY 100 CROSBY PARKWAY KC2Q COVINGTON, KY 41015

GREENBERG LAW ALPERSTEIN & ASSOCIATES 314 CHERRY AVENUE VORHEES, NJ 08403

HAYFORD ROAD STORAGE 10808 W. 49TH AVENUE SPOKANE, WA 99224 HORIZON CREDIT UNION PO BOX 15128 SPOKANE VALLEY, WA 99215

IDAHO STATE TAX COMMISSION PO BOX 36 BOISE, ID 83722

IN DEBTED MAIL PROCESSING CENTER PO BOX 1201 FARMINGTON, MO 63640

LES SCHWAB PO BOX 35181 SEATTLE, WA 98124-5181

LEXUS FINANCIAL SERVICES PO BOX 5855 CAROL STREAM, IL 60197

LIGHTSTREAM PO BOX 849 WILSON, NC 27894

MULTICARE HEALTH SYSTEM PO BOX 34883 SEATTLE, WA 98124

NELNET PO BOX 82561 LINCOLN, NE 68501-2561

NEWREZ, LLC C/O SHELLPOINT MORTGAGE SERVICING PO BOX 650840 DALLAS, TX 75265-0840 NUMERICA CREDIT UNION PO BOX 6011 SPOKANE, WA 99207

PROSPER
PO BOX 650078
DALLAS, TX 75265

SPOKANE TEACHERS CREDIT UNION PO BOX 1954 SPOKANE, WA 99210

STATE COLLECTION SERVICE, INC. PO BOX 6250 MADISON, WI 53716-0250

STCU 620 N. SIGNAL DRIVE LIBERTY LAKE, WA 99019

SYNCHRONY BANK PO BOX 965036 ORLANDO, FL 32896

UNITED STATES OF AMERICA INTERNAL REVENUE SERVICE KANSAS CITY, MO 64999-0149

UNITED STATES OF AMERICA INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY OPERATION PO BOX 7346 PHILADELPHIA, PA 19101

UNITED STATES OF AMERICA INTERNAL REVENUE SERVICE 915 W SECOND AVENUE SUITE 3260 SEATTLE, WA 98174 UNITED STATES OF AMERICA ATTORNEY GENERAL, MERRICK GARLAND 950 PENNSYLVANIA AVE NW WASHINGTON, DC 20530

UNITED STATES OF AMERICA INTERNAL REVENUE SERVICE PO BOX 742562 CINCINNATI, OH 45280

UPSTART CUSTOMERS BANK CUSTOMERS BANK LOAN OPERATION PO BOX 1503 SAN CARLOS, CA 94070

WELLS FARGO, N.A. PO BOX 522 DES MOINES, IA 50306-0572

WELLS FARGO, N.A.
PO BOX 51193
LOS ANGELES, CA 90051-5493

ZWICKER & ASSOCIATES AARON MCLELLAN 12550 SE 93RD AVE #430 CLACKAMAS, OR 97015